

JUL 10 2006

PTO/SB/31 (04-05)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) SEDN/5218				
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <u>7/10/2006</u> <i>2 copies</i> Signature <u><i>Laura E. Crater</i></u> Typed or printed name <u>LAURA E. CRATER</u>	In re Application of <u>Michael L. Asmussen</u> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">Application Number 09/609,285</td> <td style="width: 50%; padding: 2px;">Filed 06/30/2000</td> </tr> </table> For ADVANCED SET TOP TERMINAL HAVING A PROGRAM PAUSE FEATURE WITH VOICE-TO-TEXT CONVERSION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">Art Unit 2811</td> <td style="width: 50%; padding: 2px;">Examiner Lonsberry, Hunter B.</td> </tr> </table>		Application Number 09/609,285	Filed 06/30/2000	Art Unit 2811	Examiner Lonsberry, Hunter B.
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Art Unit 2811	Examiner Lonsberry, Hunter B.					

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 500

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

☒ The Director is hereby authorized to charge any fees (including extension of time fees) which may be required to make Applicant's Notice of Appeal timely and complete, or credit any overpayment to Deposit Account No. 20-0782/SEDN/5218. I have enclosed a duplicate copy of this sheet.

☒ Applicant requests a one month extension of time.

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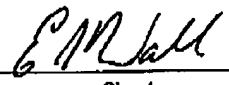
I am the

☐ applicant/inventor.

☐ assignee of record of the entire interest.
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.
(Form PTO/SB/08)

☒ attorney or agent of record.
Registration number 39,414.

☐ attorney or agent acting under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34. _____


 Signature
EAMON J. WALL
 Typed or printed name
732-530-9404
 Telephone number
7/10/06
 Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 41.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11, 1.14 and 41.6. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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